

Work Order ID 99627

99627

Page 1

April-11-13 2:25:26 PM

Item ID: D2348

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Wearplate

Start Date: 4/11/13 Start Qty: 20.00

~~*20*~~

19

Cust Item ID:

Required Date: 4/11/13 Req'd Qty: 20.00

~~*20*~~

Customer:

Reference:

Approvals: Process Plan:

Date: 13-04-16

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start ***NR1***

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D2348	Rev C								
100	FLOW WATER JET	0.00							
100									
Waterjet	Memo	0.00							
FLOW CNC Waterjet	1-Cut as per Dwg D2348								
<u>6001.063</u>	Dwg Rev: <u>e</u>								
	Prog Rev: <u>C</u>								
	2-Deburr if necessary								
110	QC2- Inspect parts off machine FAI/FAIB	0.00							
110									
QC	Memo	0.00							
Quality Control									
120	QC8- Inspect parts - second check	0.00							
120									
QC	Memo	0.00							
Quality Control									

19
20
Ac
13.08.13

19
20
Ac
13.08.13

19
27
13.8.13

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General		
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset	<input type="checkbox"/> Pressure/Forced
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Weld
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Wrong Stock Pulled
			<input type="checkbox"/> Other

Work Order ID 99627

99627

Page 2

April-11-13 2:25:26 PM

Item ID: D2348
Revision ID:
Item Name: Wearplate
Start Date: 4/11/13
Required Date: 4/11/13
Reference:

Accept

N900040100

Setup Start *NS1*
Stop *NS2*

Start Qty: 20.00 *20*
Req'd Qty: 20.00 *20*

Cust Item ID:
Customer:

Approvals: Process Plan: Date: Tooling: Date:
QC: Date: SPC (Y/N): Date:

Run Start *NR1*
Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	Outsource process-Anodize per QSI017 4.1.10.1	0.00							
150									
Outsource4	Memo	0.00							
Outsource process - Anodize	Issue P/O: 20929 Black Anodize per Dwg D2348 Ensure Certificate of Conformity is attached								CL 13/08/14 19
160	Receive & Inspect for Damage & Mat'l Certs	0.00							
160									
Packaging	Memo	0.00							
Packaging	Ensure certificate of conformity is attached								19x 13-8-23
170	QC5- Inspect part completeness to step on W/O	0.00							
170									
QC	Memo	0.00							
Quality Control	INSPECT CERTS								19

DAS

27

9-89

13.8.23

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION <div style="display: flex; justify-content: space-around;"> <div> <input type="checkbox"/> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update </div> <div> <input type="checkbox"/> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab </div> <div> <input type="checkbox"/> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite </div> <div> <input type="checkbox"/> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier </div> <div> <input type="checkbox"/> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 99627

99627

Page 3

April-11-13 2:25:26 PM

Item ID: D2348

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Wearplate

Stop

NS2

Start Date: 4/11/13

Start Qty: 20.00

20

Cust Item ID:

Required Date: 4/11/13

Req'd Qty: 20.00

20

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

180

180

Small Fab

Small Fab

Small Fab

Memo

Install Insert as per Dwg D2348

0.00

0.00

19x

13/08/26

190

190

QC

Quality Control

QC5- Inspect part completeness to step on W/O

Memo

0.00

0.00

DAS
27
9-89
138.26

19

200

200

Packaging

Packaging

Identify as per dwg & Stock Location:

Memo

0.00

0.00

STU09

13/8/26 (19)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 99627***99627***

Page 4

April-11-13 2:25:26 PM

Item ID: D2348

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Wearplate

Start Date: 4/11/13

Start Qty: 20.00

20

Cust Item ID:

Required Date: 4/11/13

Req'd Qty: 20.00

20

Customer:

Reference:

Run Start

NR1

Approvals:

Process Plan:

Date:

Tooling:

Date:

Stop

NR2

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

210

QC21- Final Inspection - Work Order Release

0.00

210

QC

Memo

0.00

Quality Control

MLJ 13-08-26

13-08-26

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Picklist Print

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Page 1

Work Order ID: 99627

Parent Item: D2348

Parent Item Name: Wearplate

Start Date: 4/11/13

Required Date: 4/11/13

Start Qty: 20.00

Required Qty: 20.00

Comments: IPP Rev A Removed from 9 Digit 05-12-05 JLM
IPP Rev:B Now on Waterjet 06-07-03 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3996-FE-832-EF Self-Clinching Fastener		Manufactured	No			180	Each	389.0000	4	80		4/13/08/26	

Location	Loc Qty	Loc Code
GA	389	
82502	46	
85727	34	
96038	309	

M6061T6S.063
6061-T6 .063 Sheet

Purchased No

100 sf 232.8625 0.0198 0.416842

126.075 → 0.42 13,08.18

Location	Loc Qty	Loc Code
MAT021	232.8625	
123135	120.5625	
124003	112.3	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

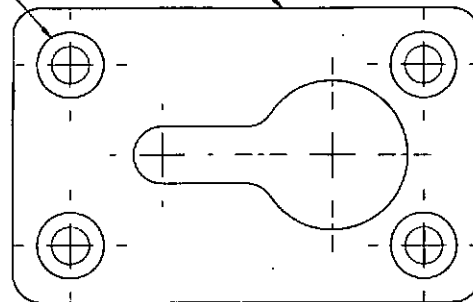
Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data <input type="checkbox"/>										
Equip/Tooling <input type="checkbox"/>										
Operator <input type="checkbox"/>										
Material <input type="checkbox"/>										
Setup <input type="checkbox"/>										
Other <input type="checkbox"/>										
Process <input type="checkbox"/>										
Supplier <input type="checkbox"/>										
Training <input type="checkbox"/>										
Unapproved <input type="checkbox"/>										

FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

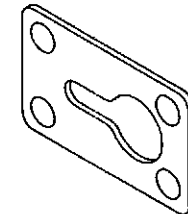
ITEM	QTY -041	P/N	DESCRIPTION
1	X	D2348	WEAR PLATE
2	1	D2348F	FLAT PATTERN
3	4	D3996-FE-832-EF	SELF-CLINCHING FASTENER

D3996-FE-832-EF
SELF-CLINCHING FASTENER
4 PL

D2348F



D2348 WEAR PLATE



99627
P/B-04-16

RELEASED
2009-11-09

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D2348" USING REMOVABLE TAG
- 7) WEIGHT: 0.01 lbs

C	REDRAW, ADD +0.003/-0.000 TOL (ZN D4-2), NCR 05-042	CP	09.10.01
B2	CHANGED BACK TO 6061-T8	DS	02.02.21
B1	CHANGED TO AISI 304/316 MATERIAL	DS	00.03.07
B	CHANGED PEM INSERT TO 8-32	BW	95.02.20
REV.	DESCRIPTION	BY	DATE
DESIGN	BW	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	97		
CHECKED	97	DRAWING NO.	REV. C
MFG. APPR.	97	D2348	SHEET 1 OF 2
APPROVED	97	TITLE	SCALE
DE APPR.	97	WEAR PLATE	NTS
DATE	09.10.01	COPYRIGHT © 1995 BY DART AEROSPACE LTD THIS DOCUMENT IS UNCLASSIFIED AND IS SUPPLIED BY THE OFFICE OF THE CHIEF OF DEFENSE PROCUREMENT NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD	



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada
Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 62582

Date: 22-Aug-13

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description		
1 lot	Part: ASST 11 PCS D4410-5 19 PCS D2348 BLACK ANODIZE MIL-A-8625 TYPE II CLASS 2 Job: 20130531	Rev:	
		PO: 20929	Line:
<p>Certificate of Conformance</p> <p>A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.</p> <p>ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY</p> <p>DATE : <u>22/8/13</u></p> <p>CERTIFIED SIGNATURE : <u>[Signature]</u></p> <p>RECEIVER SIGNATURE : _____</p>			



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO20929

Purchase Order Date 8/14/2013

PO Print Date 8/23/2013

Page Number 1 of 5

Order From :

VC-ATG001

Ship To : DART AEROSPACE LTD

A.T.G. INDUSTRIES INC.
731 INDUSTRIELLE ROAD
ROCKLAND, ON K4K 1T2
CANADA

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

RECEIVED
FAXED

Contact Name
Vendor Phone 613-446-4544

Ship To Contact
Ship To Phone
Ship Via: Delivered
Ship Acct:

Buyer Chantal Lavoie
Customer POID
Customer Tax # 10127-2607
Terms Net 30
Currency CAD
FOB FCA - (Free Carrier)

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extend Pri
1	102039	D4410-5 FACE PLATE	8/30/2013 Yes 8/30/2013 FINISH: BLACK ANODIZE PER MIL-A-8625F TYPE 1/IB/IC/II/IIB CLASS 2		11.00	\$1.41	\$15.00
						Line Total:	\$15.00
2	99627	D2348 WEARPLATE	8/30/2013 Yes 8/30/2013 FINISH: BLACK ANODIZE PER MIL-A-8625F TYPE 1/IB/IC/II/IIB CLASS 2		19.00	\$1.41	\$26.00
						Line Total:	\$26.00
3	102843	646.3012 LOWER GUIDE	8/30/2013 Yes 8/30/2013 FINISH: HARD BLACK ANODIZE IAW MIL-A-8625 TYPE III CLASS 2 FINISH: PRIME IAW MIL-P-23377 J TYPE 1 CLASS N		10.00	\$0.00	\$0.00

Note:

8/23/2013

